U.S. Department of Labor Office of Labor-Management Standards Washington, DC 20210

## FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No. 1215-0188 Expires 11-30-2006

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



1. File Number U -

READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

2. Fiscal Year Covered From:

·	1 / 1 / 2004 Through: 12 / 31 / 2004	
Name and address of person filing.	4. Name, file number, and address of labor organization.	
Name Christine A Provost	Name Actors' Equity Association	
	Labor Organization File Number 006-029	
P.O. Box, Bldg., Room No., if any Suite 1500	P.O. Box, Building and Room Number, if any Suite 1500	
Street 125 South Clark Street	Street 125 South Clark Street	
City . Chicago	City Chicago .	
State   T11inois   ZIP Code + 4   60603-4037	State I111nois ZIP Code + 4 60603 - 4037	
5. Position in labor organization. Senior Business Representative	re	
Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):  A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.		
Name and address of Employer (including trade name, if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Chicago Shakespeare Theater  Trade Name, if any:	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand	
P.O. Box, Bldg., Room No., if any	the producer's and members' needs, and make myself available to answer the actors' and stage managers' questions about a production.	
Street 800 East Grand Avenue	7.b. Amount. 2/4/04 MOLIERE COMEDIES (ITICKET); 3/12/04 A LITTLE NIGHT MUSIC(ITICKET); 4/20/04 MIDSUMMER NIGHT'S DREAM (2 tickets); 5/21/04 KING JOHN (2tiz); 4/13/04 IMAGINARY INVALID (ITICKET); 3/24/04 PETER PAN (2 FIX);	
Chicago  **Chicago************************************	S/S/O4 ROMEO+ JULIET O - INDUSTRY (2FIX); 8/2 SUNDER	
State III inois ZIP Code +4 60611	9/13/04 ROSE RAGE (2tix); 11/19/04 MERRY WIVES OF WINDSOR (2tix); 12/9/04 PLAYBOY OF THE WESTERN WORLD (2tix)	
Signature		
15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed C. X Krovost	On 8/8/2005 312-641-0393	

Date

Telephone Number

Name of Person Filing Christine Provost	File Number <b>U-</b>		
B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.			
8. Name and address of Business (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State  ZIP Code + 4	9. Business deals with:  a. Labor Organization  b. Trust  c. Employer		
10. If 9.b. or 9.c. is checked give trust or employer's name.	11.a. Nature of such dealing.		
Name Trade Name, if any:  P.O. Box, Bldg., Room No., if any			
Street	11.b. Approximate dollar value of such dealing.	gramma "com discolary y and gramma discolary (50 pt.) and the gramma discolar solvens. The base base measurement and account that	
City	12.a. Nature of interest held or income received		
State  St			
	12.b. Amount.	section and the specific and specific and the section of the section and the section of the sect	
C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.			
13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).	14.a. Nature of payment.		
Name			
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any			
Street			
City			
State ZIP Code + 4			
13.b. Is the Business an Employer or Consultant?	14.b. Amount of payment.		

Name of Person Filing	Christine	Provost

File Number U-

## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name   Steppenwolf Theatre Company	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to	
Trade Name, if any:	oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement,	
	anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer the actors' and stage managers' questions about a production.	
P.O. Box, Bldg., Room No., if any 4th Floor	7.b. Amount. 1/7/04 MAN FROM NEBRASKA (2tix); 3/10/04 TALE OF 2 CITIES (1ticket); DAMAGE CONTROL 3/25/04	
Street 758 West North Avenue	TALE OF 2 CITIES (I FICKET); DAMAGE CONTROL \$\\ 25/04  (I + i cket); 4/23/04 FALL Z EARTH (Z + i ckets); 6/10/04 I  NEVER SANG FOR OF INDUSTRY MY FATHER(Z  +i x); 8/13/04 FRANKIE  (Z+i x); 11/12/04 THE DRESSER (Z+i x); 12/5/04 ONE ARM	
City Chicago	Hix); 8/13/04 FRANKIE COMPS AND JCHNNY	
State Tllinois ZIP Code + 4 60614	(2+1x); 11/12/04 THE DRESSER (2+1x); 12/5/04 ONE ARM (2+1x)	
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Actors' Theatre of Louisville	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answe	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	the actors' and stage managers' questions about a production.  7.b. Amount. 1/23/04 ALL my. Sons (1+10Ke+)	
Street 316-320 West Main Street	The following the second of th	
City Louisville	O- COMP	
State Kentucky ZIP Code + 4 40202		
A. Held an interest in, engaged in transactions (including loans) with, or derived i	ncome or other economic benefit of monetary value from an employer whose	
employees your organization represents or is actively seeking to represent.		
Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name Ensemble Theatre of Cincinnati	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	the actors' and stage managers' questions about a production.	
Street 1127 Vine Street	7.b. Amount. 1/29/04 A LESSON BEFORE DYING (1+1cket)	
City Cincinnati	O-comp	
State   Ohio   ZIP Code + 4   45210		
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	Name of Person	Filing	Christine	Provost
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File Number U-

Part A Continuation Page			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Stage One Trade Name, if any:	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement,		
P.O. Box, Bldg., Room No., if any	anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer the actors' and stage managers' questions about a production.		
Street 501 West Main Street .	7.b. Amount. 1/29/04 MOST VALVABLE PLAYER (1 ticket)		
. City Louisville	O COMP		
State Kentucky ZIP Code + 4 40202			
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose		
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Cincinnati Playhouse in the Park	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any P.O. Box 6537	the actors' and stage managers' questions about a production.  7.b. Amount. 1/30/04 GOING GONE (1+10/Ket)		
Street	& INDUSTRY		
City Cincinnati	O - COMP		
State Ohio ZIP Code + 4 45206			
A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.			
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.		
Name Disney Theatrical Productions	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer		
Trade Name, if any:			
P.O. Box, Bldg., Room No., if any Suite 300	the actors' and stage managers' questions about a production.  7.b. Amount. 1/14/04 LION KING (Z TICKETS)		
Street 1450 Broadway	Wallsten		
City New York	Comps Comps		
State New York ZIP Code ÷ 4 10018			

Name of Person Filing	Christine	Provost
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File Number U-

## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived i	ncome or other economic benefit of monetary value from an employer whose	
employees your organization represents or is actively seeking to represent.	Theories of duties economic bestella of monetary value from an employer whose	
Name and address of Employer (including trade name if any).	7 a Nature of Interest Transaction or Income	
Name KGP Partners, LLC	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensure	
Trade Name, if any:	the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer	
P.O. Box, Bldg., Room No., if any	the actors' and stage managers' questions about a production.  7.b. Amount. 4/27/04 BLEACHER BUMS (Z+i×)	
Street 196 Oak Street		
City Elmhurst	# O - INDVSTRY Comps	
State Illinois ZIP Code + 4 60126		
A. Held an interest in, engaged in transactions (including loans) with, or derived employees your organization represents or is actively seeking to represent.	income or other economic benefit of monetary value from an employer whose	
6. Name and address of Employer (including trade name if any).	7.a. Nature of Interest, Transaction, or Income.	
Name The Diva Company, LLC	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to oversee the members' working conditions, monitor safety issues, ensured the producer's compliance with our collectively bargained agreement, anticipate potential grievances, be prepared for negotiations, understate the producer's and members' needs, and make myself available to ansure the producer's and members' needs, and make myself available to ansure the productions.	
Trade Name, if any:		
P.O. Box, Bldg., Room No., if any	the actors' and stage managers' questions about a production.  7.b. Amount. 9/26/04 DIVA DIARIES (2+ickets)	
Street 14190 Harbor Lane		
City Palm Beach	O- comes	
State Florida ZIP Code + 4 33410		
A. Held an interest in, engaged in transactions (including loans) with, or derived in	income or other economic benefit of monetary value from an employer whose	
employees your organization represents or is actively seeking to represent.	7.a. Nature of Interest, Transaction, or Income.	
6. Name and address of Employer (including trade name if any).	As a business rep for a theatrical union, it is an integral part of my job to see the theatrical productions in which our members work in order to	
Name Bill Kenwright Ltd.	oversee the members' working conditions, monitor safety issues, ensure the producer's compliance with our collectively bargained agreement.	
Trade Name, if any: c/o Alan Wasser Associates	anticipate potential grievances, be prepared for negotiations, understand the producer's and members' needs, and make myself available to answer the actors' and stage managers' questions about a production.	
P.O. Box, Bldg., Room No., if any 8th Floor	7.b. Amount. 11/3/04 SCROOGE, THE MUSICAL (1+1x)	
Street 1650 Broadway	& INDUSTEY	
City New York	O - CO M -	
State New York ZIP Code + 4 10019		